

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 890641 RECEIPT DATE: 07 / 31 / 01  
IA NUMBER: PCT/ EP00 / 00490 IA FILING DATE: 01 / 24 / 00  
FAMILY NAME: BUSROPAN DELAY WAIVED (Y/N): Y  
GIVEN NAME: BRAYAN JERREL DEMAND RECEIVED (Y/N): N  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 02 / 22 / 99  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 04443/LH COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
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CITY: NEW YORK  
STATE/COUNTRY: NY ZIP: 100172023  
EMAIL:  
APPLICATION TITLES:

ACCESS- PPOINT -DEPENDENT RATE FIXING OF TELECOMMUNICATION LINKS

TAB TO LAST POSITION, PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 5236

<b>SERIAL NUMBER</b> 09/890,641	<b>FILING DATE</b> 07/31/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> 04443/LH	
<b>APPLICANTS</b> Bryan Jerrel Busropan, Leidschendam, NETHERLANDS; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/EP00/00490 01/24/2000 <b>** FOREIGN APPLICATIONS *****</b> NETHERLANDS 1011358 02/22/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Frishauf Holtz Goodman Langer & Chick 767 Third Avenue 25th Floor New York ,NY 10017-2023					
<b>TITLE</b> Access- point -dependent rate fixing of telecommunication links					
<b>FILING FEE RECEIVED</b> 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		